



STATE OF WASHINGTON
WASHINGTON STATE BOARD OF HEALTH
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January 30, 2003

The Honorable Alex Deccio, Chair
Senate Health & Long Term Care Committee
213A Newhouse Building
Post Office Box 40414
Olympia, Washington 98504-0414

Dear Mr. Chairman:

I am writing as chair of the Washington State Board of Health to share the Board's support for the concept of—but not all of the specific provisions of—Senate Bill 5039, which is scheduled for a hearing before your committee today. The legislation would require the Department of Health (DOH) to develop a state prevention and management plan for hepatitis C (HCV).

The Board has concerns about the bill as originally submitted. The Board recently had a chance, however, to review a proposed substitute for SB 5039 after the Office of Financial Management asked DOH and the Board to prepare a fiscal note. The substitute language addresses all of the Board's concerns concern but one. At this time we would like to recommend an amendment to the substitute.

The proposed substitute would authorize the State Board of Health to adopt rules necessary to implement the plan. This is an appropriate responsibility for the Board, which is charged with making rules to control the spread of communicable diseases under RCW 43.20.05(e) and sexually transmitted diseases, including HIV, under chapter 70.24 RCW.

The current bill would require that the state prevention and control plan assess the ability of HIV testing centers to provide anonymous and confidential testing for HCV. Anonymous testing for HIV is an exception to common practice for the control and treatment of communicable disease. There is scientific research to support this exceptionalism for HIV, but not for HCV, which unlike HIV is curable in many instances. The Board recommends striking the phrase "anonymous and" from Sec. 1, subsection 2(e). In the proposed substitute (S.1033.3/03 3rd draft) this would be on page 2, line 21.

The Board, at the request of the Washington State Association of Local Public Health Officials (WSALPHO), agreed in December to review its HIV rules under the 1988 AIDS Omnibus Act. This review will occur in collaboration with DOH, the AIDSNet Council, and various

stakeholders. The work may include exploring the advisability of expanding the scope of those rules to encompass other blood borne pathogens, particularly HCV, which the Board recognizes is a major emergent health issue. The Board believes it has sufficient rule making authority under existing communicable disease and sexually transmitted disease statutes, but this bill would strengthen that authority by explicitly authorizing Board rule making around the specific HCV prevention and control activities called for by this legislation.

The Board is pleased to have had a chance to comment during the drafting of the proposed substitute, both through committee staff and through the department, which worked extensively with the prime sponsor and advocates. It appreciates the flexibility and commitment demonstrated by everyone working on this bill, particularly Sen. Kastama and committee staff.

If a version of SB 5039 based on the substitute language becomes law, the Board would look forward to consulting with DOH on the development of the plan and engaging in rule making necessary for its implementation within available appropriations.

Sincerely,



Linda Lake
Chair, Washington State Board of Health

cc: Senate Health & Long Term Care Committee Members
The Honorable Jim Kastama, Washington State Senate
Washington State Board of Health Members
Don Sloma, State Board of Health
Ree Sailors, Governor's Office of Health Policy
Mary Selecky, Department of Health
Patty Hayes, Department of Health